

re application of: Robert S. MIZEK et al.

erial No.: 10/771,086

iled: 03 February 2004

or: ARCHERY BOW VIBRATION DAMPENER

OMMISSIONER FOR PATENTS

.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

ransmitted herewith is an amendment in the above-identified application.

Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a verified statement previously submitted.

A verified statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

No additional fee is required.

he fee has been calculated as shown below:

	(Col.1)		(Col.2)	(Col.3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	18	MINUS	20	0
INDEP.	6	MINUS	3	3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, in an envelope addressed to: Commissioner of Patents, P.O. Box 1450, Alexandria, Virginia, 22313-1450, on 07 October 2004 <i>Kevin D. Erickson</i> 07 OCT '04 <small>Signature Date of Mailing</small>	
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SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
RATE	ADD'L FEE		RATE	ADD'L FEE
x 09 =	\$		x 18 =	\$
44 =	\$132.00		x 88 =	\$
+ 150 =	\$		+ 300 =	\$
TOTAL ADD'L FEE	\$132.00	OR	TOTAL	\$

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

Please charge my Deposit Account No. 19-3550 in the amount of \$ 132.00.
A duplicate copy of this sheet is attached.

A check in the amount of \$ _____ is attached.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-3550. A duplicate copy of this sheet is attached.

☒ Any filing fees under 37 C.F.R. 1.16 for the presentation of extra claims.

☐ Any patent application processing fees under 37 C.F.R. 1.17

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Respectfully submitted,
01 FC:2201

44.00 DA

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